## GENERAL ASSEMBLY OF NORTH CAROLINA SESSION 2011

S SENATE BILL 835\*

Short Title:		Eliminate LME Provider EndorsementAB				
Sponsors:		Senator Pate.				
Referred to:		Health Care.				
May 22, 2012						
A BILL TO BE ENTITLED  AN ACT RELATING TO PROVIDER ENDORSEMENT FUNCTIONS OF LOCAL						
MANAGEMENT ENTITIES, AS RECOMMENDED BY THE JOINT LEGISLATIVE						
OVERSIGHT COMMITTEE ON HEALTH AND HUMAN SERVICES.						
		Assembly of North Carolina enacts:				
		CTION 1. G.S. 122C-114 reads as rewritten:				
"§ 122C-1	114.	Powers and duties of the Commission.				
(a) The Commission shall have authority as provided by this Chapter, Chapters 90 and						
148 of the	e Gen	neral Statutes, and by G.S. 143B-147.				
(b)						
	(1)		_			
		uniform portal process, for implementation by the Secretary as req	uired			
		under G.S. 122C-112.1(14).				
	(2)		ealth,			
	(2)	developmental disabilities, and substance abuse services.	1.1			
	(3)	<u>.</u>	ealth,			
	(4)	developmental disabilities, and substance abuse services.	:			
	(4)					
		used in G.S. 122C-141. In adopting rules under this subsection.				
		Commission shall take into account the need to ensure fair compe	шиоп			
	among providers."  SECTION 2 122C 115 4(b)(2) reads as rewritten.					
	<b>SECTION 2.</b> 122C-115.4(b)(2) reads as rewritten:  "(2) Provider endorsement, monitoring, technical assistance, capacity					
	development, and quality control. An LME may remove a provider!		•			
		endorsement if a provider fails to do any of the following:	raci s			
		a. Meet defined quality criteria.				
		b. Adequately document the provision of services.				
e. Provide required staff training.						
		d. Provide required data to the LME.				
		e. Allow the LME access in accordance with rules established to	ınder			
		G.S. 143B-139.1.				
		f. Allow the LME access in the event of an emergency or in respor	ise to			
		a complaint related to the health or safety of a client.				
		If at anytime the LME has reasonable cause to believe a violation	on of			



licensure rules has occurred, the LME shall make a referral to the Division of Health Service Regulation. If at anytime the LME has reasonable cause to

19

1		believe the abuse, neglect	or exploitation of a client has occurred, the LME		
2		shall make a referral to	the local Department of Social Services, Child		
3		Protective Services Progra	m, or Adult Protective Services Program."		
4		<b>SECTION 3.</b> G.S. 122C-151.4(a	) reads as rewritten:		
5	"(a)	Definitions. – The following definitions apply in this section:			
6		(1) "Appeals Panel" means t	he State MH/DD/SA Appeals Panel established		
7		under this section.			
8		(1a) "Client" means an individ	ual who is admitted to or receiving public services		
9		from an area facility. "Clie	ent" includes the client's personal representative or		
10		designee.			
11		(1b) "Contract" means a contr	act with an area authority or county program to		
12		provide services, other that	in personal services, to clients and other recipients		
13		of services.			
14		(2) "Contractor" means a pe	rson who has a contract or who had a contract		
15		during the current fiscal <del>ye</del>	ear, or whose application for endorsement has been		
16		denied by an area authorit	y or county program.year.		
17		(3) "Former contractor" mean	s a person who had a contract during the previous		
18		fiscal year."			

fiscal year." **SECTION 4.** This act is effective when it becomes law.

Page 2 S835 [Edition 1]